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Bib Data Sheet

SERIAL NUMBER 10/815,376	FILING OR 371(c) DATE 04/01/2004 RULE	CLASS 602	GROUP ART UNIT 3772	ATTORNEY DOCKET NO. 0061-011
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APPLICANTS

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** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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** 06/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance	MI	7	42	3
Verified and Acknowledged	<i>Bonita Jard</i> <i>BJ</i> Examiner's Signature Initials				

ADDRESS

40972

TITLE

Ankle stress relief device

FILING FEE RECEIVED 583	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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